## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)				PAGE 1 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Every Voice Action				C C00566208
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee Buying Time			Date o	of Public Distribution/Dissemination
				10 22 2015
Mailing Address 650 Massachusetts Ave NW			Amour	nt
Ste 210	State	Zip Code		156395.00
Washington	DC 20001-3728			action ID: VN7BA9WFYC7 of Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	М	10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought	t: House District:
Mike Rounds		X Oppose	Preside	ent Senate State: SD
Calendar Year-To-Date Per Election for Office Sought	1043649.15 Disk			t For: Primary X General
Full Name of Payee	_ <del></del>		Date o	of Public Distribution/Dissemination
Buying Time				10
Mailing Address 650 Massachusetts Ave NW			Amour	nt
Ste 210				
City Washington	State DC	Zip Code 20001-3728		167700.00  ction ID : VN7BA9X0CK0  of Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	M	
Name of Federal Candidate		Support	Office Sought	t: House District:
Mike Rounds		X Oppose	Preside	ent X Senate State: SD
Calendar Year-To-Date Per Election for Office Sought		1043649.15	Disbursement 2014 Ot	t For:
(a) SUBTOTAL of Itemized Independent Expenditu	res		• •	324095.00
(b) SUBTOTAL of Unitemized Independent Expend	litures		· •	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	date or authorized	•		•
David Donnelly	[Electron	nically Filed] Date	e 10	22 2014
Signature				